

AMENDMENT TRANSMITTAL LETTER (Small Entity)Applicant(s): **MALA MOHIUDDIN, ET AL**

DEC

7 2005

Docket No.

14682

Application No.

10/827,252

Filing Date

April 20/04

Examiner

William C. Choi

Customer No.

000293

Group Art Unit

2873

Confirmation No.

2402

Invention: **A MICRO-ELECTRO-MECHANICAL-SYSTEM TWO DIMENSIONAL MIRROR WITH ARTICULATED SUSPENSION STRUCTURES FOR HIGH FILL FACTOR ARRAYS****COMMISSIONER FOR PATENTS:**

Transmitted herewith is an amendment in the above-identified application.

☒ Applicant claims small entity status. See 37 CFR 1.27

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	29 -	28 =	1	x \$25.00	\$25.00
INDEP. CLAIMS	2 -	3 =	0	x \$100.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$25.00

- ☐ No additional fee is required for amendment.
- ☒ Please charge Deposit Account No. **19-2550** in the amount of **\$25.00**
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **19-2550**
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.
- ☐ Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

*Signature***RALPH A. DOWELL**
(Reg. No. 26,868)Dated: **12/07/2005**

I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

(Date)

*Signature of Person Mailing Correspondence**Typed or Printed Name of Person Mailing Correspondence*

cc:

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